

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

OCT 29 2018

RECEIVED

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

1. Name of Lobbyist(s) <u>Eliza</u>	beth C. Sargent	<u> </u>	
11. Name of lobbyist's partnersl	nip, firm or corporation, if an	y:	
Sheehan Phinney Capitol C	roup		
(Name of partner	ership, firm or corporation)		
Two Eagle Square	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 228-2370	(603) 224-8899	email esargent@shee	han.com
(603) <u>228-2370</u> (Telephone)	(Fax)		
III. This statement covers: (Che reportable expense transaction: All reportable transactions o	s which are not attributable to	o any one client).	
NH Academy of Audiology	/	on the Lobbyist Registration Fo	om)
OR	y the lobbyist (including the lo	bbyist's family), ar the lobbying	
Reports caver: activity from da Octobe	5, 2018 □ te of registratian to 3/31/18 r 31, 2018 ⊠ 7/1/18 to 9/30/18	July 25, 2018 activity from 4/1/18 to 6/30/1 January 30, 2019 activity from 10/1/18 ta 12/3	
V. There have been no fees receif this box is checked, complete ju Concord, NH 03301.	eived and no reportable trans ust this form and submit it ta th	actions made since the last rep e Secretary of State's Office. Sta	oort. ale House, Room 204,
If you have paid an hor	es or made expenditures, you n norarium or reimbursed expens	nust file Addendum A- Fees ar es, you must file Addendum B- ontributions, you must file Adde	nd Expenses - Report of Honorariums or endum C- Political Contribution
Sworn Statement/Affirmation I have read RSA 15, RSA 15-B at the best of my knowledge and be	nd RSA 664 and hereby swear lief.	or affirm that the foregoing info	ormation is true and complete to
Eliabeth C S (Signature of lobbyist)	Fargent	October 31, 2018 (Date	3
Elizabeth C. Sargent (Print Name of lobbyist)	<u></u>		



STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

	name of Lobbyist(s) Elizabeth C. Sargent Name of lobbyist's partnership, firm or corporation, if any:	
11. f	Name of loodyist's partnership, firm of corporation, if any.	
<u>She</u>	eehan Phinney Capitol Group	
	(Name of partnership, firm or corporation)	
111.	Name of Client NH Academy of Audiology	Date October 31, 2018
Indi incl	Fees Received icate the gross amount of all fees received from the client identified above the uding fees for services such as public advocacy, government relations, on itering legislation, and related legal work. The gross fee amount reported shapes are considered to the content of the con	or public relations services including research,
a)	Total of all fees received in this reporting period	a) \$ <u>750.00</u>
b)	Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year	b) \$ <u>1,500.00</u>
c)	Total of all fees received to date (Add lines a and b)	c) \$ <u>2,250.00</u>
d)	Indicate the amount of any such fees that are due, but have not yet been paid	l d) \$
Lob report unrecated and mea give less any to b	Expenses: obyist(s)/Lobbying partnerships, firms, or corporations are required to report orts are to be filed for expenditures made relative to each client and if expenelated to any one client a separate report may be filed for the lobbyist(s)/fiction of expenses: (a) the aggregate total of all expenses paid during the replaced of the expenses; (b) the aggregate total of all individual expenses where the also purchased during a business lunch where the cost was \$25.00 or less, purched to the person being lobbied, purchase of a ceremonial object given to a si; and (e) an itemized statement of each individual expenditure made during purpose not covered by (a) (for example: purchase of a meal with value of possible given to the subject of lobbying with a value greater than \$25, but not grea	iditures are made by the lobbyist(s)/firm that are m. Expenses are to be reported in one of thre porting period for salaries, benefits, support staff expenditure was of \$25.00 or less (for example hase of a pen with a value of less than \$10 that it person being lobbied with a value of \$25.00 or greater than \$25.00 for greater than \$25.00 fo
a)	Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ <u>5,693.00</u>
b)	Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
	Total of all itemized expenditures reported in detail in section VI.	c) \$

d)	Total expenses for this reporting period (Add lines a, b and c)	d) \$ 5,693.00
c)	Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's rep	c) \$ <u>12,142.00</u>
f)	Total of all expenses year to date	F) \$ <u>17,835.00</u>
Pro	Other Expenses: vide the following detail for all expenditures of more than \$25 made from uding by whom paid or to whom charged.	lobbying fees during this reporting period,
Paid	d:	Amount:
	<u> </u>	\$
		s
		S
_		S
		S
		\$
Sw	orn Statement/Affirmation by Lobbyist	
l ha is tr	we read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that are and complete to the best of my knowledge and belief.	the foregoing information
(Sig	Eliabeth Clayent on	(Date)
	zabeth C. Sargent nt Name of lobbyist)	